

1/29/01

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 10, 2002 8:00 am**  
**Secretary of State**

01-29-2002 90070 020 \*\*\*150.00

DOCUMENT # P97000003439

1. Entity Name

UNITED TRUST FINANCIAL SERVICES INC.

Principal Place of Business

P O BOX 12373

ST. PETERSBURG FL 33733

Mailing Address

P O BOX 12373

ST. PETERSBURG FL 33733

2. Principal Place of Business

PO Box 12373

Suite, Apt. #, etc.

3. Mailing Address

PO Box 20082

Suite, Apt. #, etc.

City &amp; State

ST. PETERSBURG, FL

City &amp; State

Tampa, FL

Zip

33733

Country

Zip

33622

Country

4. FEI Number

59-3418606

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Thomas J. Burns, Jr.

Street Address (P.O. Box Number is Not Acceptable)

2842 16 AVENUE NORTH

City

ST. PETERSBURG, FL

33712

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Thomas J. Burns, Jr.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

01/13/01

9. This corporation is eligible to satisfy its intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

\$5.00 May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
 NAME BURNS, THOMAS JR.  
 STREET ADDRESS 2842 16TH AVE N  
 CITY-ST-ZIP ST. PETERSBURG FL 33712

☐ Delete

TITLE President  
 NAME Burns, Thomas JR.  
 STREET ADDRESS 8411 Walnut Grove Road  
 CITY-ST-ZIP Mechanicsville, VA 23111

☒ Change ☐ Addition

TITLE ST  
 NAME SELLAS, JOHN A.  
 STREET ADDRESS 1311 N. WESTSHORE BLVD  
 CITY-ST-ZIP TAMPA FL 33607

☐ Delete

TITLE S-T  
 NAME SELLAS, JOHN  
 STREET ADDRESS POST OFFICE BOX 20082  
 CITY-ST-ZIP Tampa, FL 33622

☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas J. Burns, Jr.

Date

Daytime Phone #

11/01/01  
11/01/01

CR2E034 (9/01)